

03560.002196.1



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
: Examiner: M.E. Wallerson
TOSHIHIRO KADOWAKI)
: TC/Art Unit: 2626
Application No.: 10/669,332)
: Filed: September 25, 2003)
: For: DATA PROCESSING METHOD)
IN NETWORK SYSTEM :
CONNECTED WITH IMAGE)
PROCESSING APPARATUS : July 1, 2004

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Technology Center 2600

Mail Stop: Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

SECOND PRELIMINARY AMENDMENT

Sir:

Prior to examination on the merits and supplemental to the Preliminary
Amendment filed on September 25, 2003, please amend the above-identified application as
follows:

BEST AVAILABLE COPY



In re Application of:

TOSHIHIRO KADOWAKI

Application No.: 10/669,332

Filed: September 25, 2003

For: DATA PROCESSING METHOD IN NETWORK
SYSTEM CONNECTED WITH IMAGE
PROCESSING APPARATUS

Docket No. 03560.002196.1

Examiner: M.E. Wallerson

Group Art Unit: 2626

Date: July 1, 2004

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Technology Center 2600

Mail Stop: Amendment

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Second Preliminary Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below


CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 11	MINUS	** 20	= 0	x \$9 \$18	0
INDEP. CLAIMS	* 3	MINUS	*** 3	= 0	x \$43 \$86	0
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

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- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Leonard P. Diana
Attorney for Applicants
Registration No. 29,296

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

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